



CABINET FOR HEALTH
AND FAMILY SERVICES

KY CMP Reinvestment Application Resource Guide

Updated September 2023

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The Commonwealth of Kentucky does not discriminate on the basis of race, color, religion, sex, national origin, sexual orientation, gender identity or expression, ancestry, age, pregnancy or related medical condition, marital or familial status, disability, veteran status, political affiliation, or genetic information in accordance with state and federal laws.

KENTUCKY CIVIL MONEY PENALTY FUND OVERVIEW

A civil money penalty (CMP) is a monetary penalty the Centers for Medicare & Medicaid Services (CMS) may impose against nursing homes for either the number of days or for each instance a nursing home is not in substantial compliance with one or more Medicare and Medicaid participation requirements for long-term care facilities. CMP funds returned to the state must be reinvested to support projects that benefit nursing home residents and that protect or improve their quality of care or quality of life.

The Kentucky Cabinet for Health and Family Services, Office of the Inspector General (OIG), is the state agency (SA) responsible for the oversight and administration of the CMP Reinvestment Fund Program. Applicants shall submit an application request and a detailed line-item budget for the project to OIG for initial review and recommendation. OIG shall make an initial determination on the potential of the project to benefit certified nursing facility (CNF) residents and protect or improve their quality of care or quality of life. Once OIG determines the applications meets state requirements and CMS guidance, OIG shall then forward the application to the CMS Region 4 Long-Term Care Branch for review and approval. After a determination by OIG and CMS, the applicant will be notified of the funding determination. Applicants may contact the OIG Grants Administrator with questions regarding their CMP Reinvestment application.

A Note for CMP Extension Projects: A project is considered an “extension project” if it is similar in project details to an in progress or completed project approved after April 1, 2018 (e.g., same applicant and/or same collaborating partner, similar project focus, but to a different nursing home population). Applications that are an extension of an approved CMP reinvestment project to new CNF location(s) must submit include:

Applications for an extension project must include the following attachments:

- a. The approval letter for the previously approved, CMP-funded project
- b. Results of the previously approved CMP-funded project with confirmation by the state agency.
 - Results must show that an applicant met the project’s goals and objectives for an extension to be granted.
- c. A letter or email from the original state agency(ies) (SA) of the previously approved, CMP-funded project.
 - In the letter or email, the SA needs to state whether the previous applicant met project goals and objectives, and whether the SA recommends expanding this applicant’s project to other nursing homes.
- d. A project is considered a “continuation project” if it is similar in project details and nursing home target population to a previously approved CMP project. Continuation projects cannot exceed the allowable 36-month limit.

Note: Previous approval and funding of a project does not guarantee future approval of a similar project. Despite previous approvals, each CMPRP application receives an independent review based on its merit, content, clear need for the project, and compliance with current CMS regulation.

RESOURCE GUIDE

This resource guide contains guidelines to help applicants to develop and submit applications to OIG for the use of CMP funds. The KY CMP Reinvestment Application is located on the KY OIG Civil Money Penalty Funds webpage at: <https://www.chfs.ky.gov/agencies/os/oig/Pages/cmpfunds.aspx>.

If you have questions about the KY CMP Reinvestment Application, please contact: CMPEApplication_OIG@ky.gov.

PROJECT AND APPLICANT REQUIREMENTS

Before completing the KY CMP Reinvestment application, review the requirements below.

Projects cannot:

- Exceed three years (36 months).
- Include items or services that are not related to improving the quality of life and care of CNF residents or protecting such residents.
- Include research as a focus as the benefit to CNF residents is unknown or concentrated on the research entity, or a large portion of the budget does not directly benefit CNF residents.
- Duplicate existing requirements for the nursing home or other federal or state services.
- Include funding for capital improvements to a CNF.
- Include funding for CNF services or supplies that are already the responsibility of the CNF.
- Include funding for survey and certification operations or state expenses.
- Include funding for refreshments.
- Include funding for incentives (i.e., for attending training or completing a survey – this includes items such as payments or gift cards).
- Include excessive indirect costs.
- Include funding for the development of project curriculums or toolkits.
- Include high-dollar, complex technology, such as but not limited to engagement technology, alert systems, virtual reality, artificial intelligence, etc.
- Include unclear or excessive expenses (e.g., budget items that are not clearly detailed or itemized, unreasonably high project staff salaries or travel expenses, excessive staff to implement a project, (i.e., unreasonable marketing of projects, high indirect costs, or a large portion of the budget set aside for evaluation).
- Include supplementary or duplicative federal or state funding (i.e., personnel performing the same duties as Ombudsman, nurse aide training programs).
- Include proposed conference dates that take place while the application is still under CMP Review.
- Be resubmitted after previous CMS denial.
- Additionally, OIG and CMS will not approve projects for which a conflict of interest exists or the appearance of a conflict of interest with the entity(ies) who will benefit from the intended project(s) or use(s).

CMP FUND APPLICANTS

Applicants must:

- Be qualified and capable of carrying out the intended project(s) or use(s);
- Not have a conflict-of-interest relationship with the entity(ies) who will benefit from the intended project(s) or use(s); and
- Not be paid by a state or federal source to perform the same function as the project(s) or use(s). CMP funds may not be used to enlarge or enhance an existing appropriation or statutory purpose that is substantially the same as the intended project(s) or use(s).
- Provide a letter of support from each participating CNF. If the organization applying for a CMP project is not a CNF, letters of support from all participating CNFs are required to be submitted with the application. For example, CMS will not approve applications indicating that the applicant will approach nursing homes to participate in their project after funds are granted. Therefore, applications to implement projects in individual CNFs must have letters of commitment from the CNFs that the project will be deployed in. The commitment letter must display the project title, time frame, the CNF's CMS certification number (CCN), and signed by an individual authorized to commit the CNF. In the instance of a corporation submitting a project request on behalf of its CNFs, the above criteria on one letter listing all participating will suffice. CMS may make exceptions in rare cases to reduce or eliminate the need for letters of commitment, such as state-based conferences where all CNFs are invited to attend.

Examples of potential applicants include:

- Certified nursing facilities
- Consumer advocacy organizations
- State long-term care ombudsman programs
- Quality improvement organizations
- Private contractors
- Resident or family councils
- Professional, or state nursing home associations
- Academic or research institutions
- State, local, or tribal governments
- Profit, not-for-profit, or other types of organizations

CMP PROJECT FUNDING LIMITS

A. Resident or Family Councils: CMP funds may be used for projects by not-for-profit resident advocacy organizations that:

- Assist in the development of new independent family councils;
- Assist resident and family councils in effective advocacy on their family member's behalf;
- Develop materials and training sessions for resident and family councils on state implementation of new federal or state legislation.

Maximum project funding per nursing home-\$5,000 (one-time funding)

B. Consumer Information: CMP funds may be used to develop and disseminate information that is directly useful to nursing home residents and their families in becoming knowledgeable about their rights, nursing home care processes, and other information useful to a resident.

Maximum project funding per nursing home-\$5,000 (one-time funding)

C. Training to Improve Quality of Care: CMP funds may be considered for training in facility improvement initiatives that are open to multiple nursing homes, including joint training of facility staff and surveyors, technical assistance for facilities implementing quality assurance programs, training for resident and/or family councils, LTC ombudsman or advocacy organizations and other activities approved by CMS.

Maximum Project Funding Per Nursing Home Per Year -\$5,000, (max of \$15,000 for a three-year project).

NOTE: The maximum allowable amount for training per year is the total allowed for any and all training during a year. Funding is dependent upon each state's balance of CMP funds available. CMS will also work with states separately on state-sponsored trainings, and these training will not impact each facility's maximum amount (e.g., a facility can attend a state-sponsored training and still apply for \$5,000 for training).

D. Activities to Improve Quality of Life: CMP funds can be used for projects to foster social interaction, movement, and minimize loneliness.

Maximum Project Funding Per Nursing Home Per Year for each topic -\$5,000, (max of \$15,000 for a three-year project)

GUIDELINES TO COMPLETE THE KY CMP REINVESTMENT APPLICATION

An effective CMP Reinvestment application should include the following information. The Resource Guide follows the structure of the KY CMP Reinvestment Application form.

Application Section	Description
Applicant Contact and Background Information	
1. Applicant Contact Information	<p>Provide the contact information for the individual completing the application:</p> <ul style="list-style-type: none"> • Name, Phone Number, Email • Mailing Address: Street, City, County, State/Territory, Zip Code <p>Note: The primary point of contact (POC) is the individual responsible for project implementation. If the primary POC is different from the person completing the application, please provide the primary POC’s name and contact information.</p>
2. Applicant Organization Information	<p>Provide the contact information for the organization requesting CMP funds:</p> <ul style="list-style-type: none"> • Name • Phone Number • Email • Address: Street, City, County, State/Territory, Zip Code • Tax Identification Number (TIN) • Website URL <p>Note: The organization or CNF that requests CMP funding is accountable and responsible for all CMP funds granted. If a change in ownership occurs after CMP funds are granted or during the project, the primary POC should notify OIG. Notice regarding the change in ownership and its impact on the CMP Reinvestment Application award should be sent to OIG. The primary POC shall also provide a signed attestation confirming the change of ownership to OIG. OIG will communicate the change to CMS.</p>
3a. Is the organization a nursing home?	<p>Identify if the applicant is a certified nursing facility.</p> <p>✧ If the applicant is a CNF indicate if there are any outstanding CMPs and if the facility is in bankruptcy or receivership.</p>
3. Organization History	Describe the background and history of the applicant organization, including details such as the organization’s mission statement and number of years in service.
4. Organization Capabilities	Describe the organization’s capabilities, including products and services relevant to the proposed CMP project.
5. Organization Website	Provide the website address for the organization requesting CMP funds, if available.

6. Other Funding Sources	Indicate whether the applicant or their collaborative partners (if applicable) currently receive Federal or State funds. If yes, identify the sources and amounts.
6a. Other Funding Sources	Indicate whether other funding sources, such as Federal or State funds, have been applied for and/or granted for the proposed CMP project. If yes, identify the sources and amounts.
Funding	
7. Total CMP Fund Requested Amount	<ul style="list-style-type: none"> • Provide the amount requested annually. • Provide the total amount requested for the entire project. • Provide the total amount of non-CMP funds received (or anticipated) for the project. <p>Note: For example, if it is a three-year project and requires \$25,000 per year, then enter \$75,000 as the total project cost and \$25,000 as the annual cost. Annual costs may vary. If requesting \$25,000 for a one-year project, then enter \$25,000 as both the annual and total cost.</p>
8. Detailed Line-Item Budget	<p>Applicants must provide a detailed line-item budget (using the CMP Reinvestment Budget Template or similar spreadsheet) to outline specific cost requirements within each of the following budget categories:</p> <ul style="list-style-type: none"> • Personnel: an employee of the organization whose work is tied to the proposed project and provide estimated number of man hours and related duties; • Travel: provide a breakdown of mileage/airfare, per diem, and hotel rates (as applicable). Travel expenses must be reasonable. Examples of reasonable rates include but are not limited to the published U.S. government allowance rates (available from the www.gsa.gov website). Rates that exceed GSA should include justification; • Equipment purchases and rentals: materials necessary for the implementation of the project. Include the item description, the number of items requested, and cost per unit; • Contractual: any cost associated with project activities that are undertaken by a sub-contractor or third-party contractor. A detailed line-item breakdown of each sub-contractor's expenses should be included in the budget; • Other direct costs: expenses not covered in any of the previous costs; • Total indirect costs: overhead costs allocable to the project, such as a federal negotiated rate with a university. Submit a copy of the federally negotiated rate agreement with the application. • Cost-sharing: total non-CMP funds received or anticipated for this project. Please note that the amount entered in the cost-sharing field of the CMP

	<p>Reinvestment Budget Template will be automatically subtracted from the total project cost field.</p> <p>Note: Applicants must include the separate line-item budget in an Excel spreadsheet with the application submission.</p>
9. Budget Narrative	<p>The budget narrative should justify the indirect costs and cost-sharing amounts included in the CMP Fund Application Budget spreadsheet. Explain the costs calculation and methodology.</p> <p>Note: Cost-sharing is the portion of the project costs not covered by CMP funds. In general, applications that include in-kind and/or cash contributions demonstrate a commitment to the project and greater cost effectiveness. Applicants should consider all types of cost-sharing. This request is not meant to cause undue burden; therefore, we are not requesting small budgetary items such as low-cost office supplies donated by the facility. An example of cost-sharing would be a bicycling program where the facility donates half the cost of the bicycle.</p> <p>Other federal funding does not constitute cost-sharing. If cost-sharing is included, it should be listed for each year of the project. If the proposed project is a component of a larger program, identify other funding sources for the proposal, and indicate the specific funding amount to be provided by those sources.</p>
Project Details	
10. Project Title	Provide the title/name of the proposed project.
10a. Extension Projects	<ul style="list-style-type: none"> • Identify if the CMP Reinvestment Project been previously approved (same applicant and/or same collaborating partner, similar project focus, but a different CNF population). • Identify if the results of the previously approved CMP Reinvestment Project have been submitted to the State Agency. Identify if the CMP Reinvestment Project is currently in progress, if 3 months have elapsed for OIG and the CMS location to make an informed decision regarding duplication of this project. • Applicants submitting a CMP Reinvestment Extension Project shall ensure a list of the Project deliverables along with a written report with details of the project results, challenges and opportunities for improvement have been forwarded to the State Agency. Applicants submitting a CMP Reinvestment Extension Project shall provide a letter or email from the State Agency of the previously approved, CMP-funded in progress or completed project.
10b. Number of Nursing Homes	Identify the number of CNFs that will be supported by this application.

	<p>Note: If more than one CNF is participating in the CMP Reinvestment Project the applicant shall include a list of participating CNFs as an attachment to the application. The list shall include:</p> <ul style="list-style-type: none"> • Facility Name • # of certified beds • CMS Certification Number • Daily census
10c. Previous Unique Identifier	Provide the unique identify (UID) of the original or previously approved CMP project, the dates of execution, and a list of state(s) where the CMP Reinvestment Project has been implemented to benefit residents, if applicable.
11. Project Time Period	<p>Provide the number of years and the specific dates relevant to the current project.</p> <p>Note: Projects cannot exceed three years (36 months).</p>
12. Project Category	<p>Identify <u>ONE</u> appropriate category that best describes the focus of the proposed project:</p> <ul style="list-style-type: none"> • <u>Consumer Information:</u> Projects that share information about resident and resident representative rights, the nursing home care process, and generally anything useful that ensures quality care in nursing homes. • <u>Resident or Family Council:</u> Projects that focus on resident and family council development or improvement in resident centered services. • <u>Direct Improvement to Quality of Care:</u> Projects that directly improve care for nursing home residents. • <u>Cultural Change/Direct Improvement to Quality of Life:</u> Projects that enhance a resident’s self-esteem and dignity. Culture change is the common name given to the national movement for the transformation of older adult services, based on person-directed values and practices where the voices of elders and those working with them are considered and respected. • <u>Training:</u> Training that covers material that directly benefits nursing home residents. <p>Note: Proposed education/training projects need to include the following information within the appropriate application sections:</p> <ul style="list-style-type: none"> ✧ Anticipated number of attendees ✧ Target audience and plan for recruitment ✧ Accrediting authorities ✧ Timeline for implementation ✧ Plan for sustainability ✧ Provision for review of agenda, curriculum or curriculum description, and materials by OIG ✧ Provision for submission, in electronic format, to OIG: <ul style="list-style-type: none"> a. Attendee registration listing

	<p>b. Special session presentation & handouts</p> <p>c. Summary compilation of training evaluations and attendee comments.</p> <ul style="list-style-type: none"> • <u>Other</u>, please specify.
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Summary of Project and Benefit to Residents

13. Summary of the Project and its Purpose	<p>a. Describe the problem, gap, or CNF need the project is aiming to address.</p> <p>b. Describe realistic, actionable project goals relevant to the project’s objective. Note: A goal is a desired result you want to achieve and is typically broad and long-term. Example: To provide person-centered care to improve the quality of life of residents living with dementia.</p> <p>c. Describe the project’s quantifiable objectives, including the specific metrics that will be used to measure actions the CNF must take to achieve the overall goal. Note: An objective defines the specific, measurable actions the nursing home must take to achieve the overall goal.</p> <ul style="list-style-type: none"> - It is suggested the project use the SMART (Specific, Measurable, Achievable, Relevant, Time-bound) method or a similar method to define and measure specific objectives. - Please see the Tips for Writing Clear Goals and Quantifiable Objectives on the CMP Reinvestment Resource website for further information <p>d. Describe the plan to implement the project, including implementation timeline.</p>
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14. Benefit to Nursing Home Residents	<p>Describe how the project will directly benefit CNF residents.</p> <p>Note: CMP funds shall only be used for activities that directly benefit CNF residents, that project or improve their quality of care or quality of life, and that go above and beyond what is already required of the CNF(s).</p> <p>All project application submissions must be in alignment with CMS’ Non-Allowable and Allowable criteria. Please refer to the Allowable and Non-Allowable document for activities and funding limits for proposed projects. This document can be accessed at: Allowable and Non-Allowable Uses of CMP Funds</p>
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Partnering Entities

15. Nursing Home and Community Involvement	<p>Provide a brief description of how the nursing home community (including resident and/or family councils and direct care staff) will be involved in the development and implementation of the project.</p> <p>Note: If the organization applying is not a CNF, letters of support from all participating CNFs are required in the application submission.</p>
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16. Other Partnering Entities	<p>If applicable, list any other collaborating entity(ies) that will be partnering with the applicant on this project (i.e., individuals, organizations, associations, facilities).</p> <ul style="list-style-type: none"> • Include specific deliverables for which the partnering entity(ies) will be responsible. • If applicable, include how much funding partnering entity(ies) will receive and if the entity(ies) has submitted previously for CMP funding.
Deliverables, Risks, Performance Evaluation, and Sustainability	
17. Project Deliverables	List any physical items that will be deliverables because of funding the project (i.e., training materials, equipment, progress reports).
18. Performance Monitoring and Evaluation	<p>Describe how the project’s ongoing performance will be monitored and evaluated throughout the term of the project, including specific outcome metrics, and the intended outcomes.</p> <p>Example outcome metrics:</p> <ul style="list-style-type: none"> • At the end of the one-year period, the applicant organization had conducted 12 in-person trainings with 1,455 attendees. A satisfaction questionnaire found that 70% of attendees were very satisfied with the training they received, 15% satisfied, 3% unsure, 10% dissatisfied, and 2% very dissatisfied. • Nursing homes that sent at least one staff member to the training saw an improvement in influenza immunization rates by 15% and pneumococcal immunization rates by 100%. <p>Note: These metrics shall be submitted in Quarterly Reports to OIG, throughout the project, and included in the Final Report upon completion of the project.</p>
19. Duplication of Effort	Provide information that demonstrates the project will not duplicate or overlap with the responsibility of the CNF to meet existing Medicare and Medicaid requirements and other applicable statutory and regulatory requirements, nor duplicate federal or state services.
20. Risks	<p>Describe the potential risks or barriers associated with implementing the project and the plan to address these concerns.</p> <p>Note: The applicant should the include the following in the potential risks and/or barriers to be addressed:</p> <ul style="list-style-type: none"> • CNF staff turnover • Infection control measures
21. Sustainability	<ul style="list-style-type: none"> • If applicable, provide a plan on how the project or outcomes will be sustained following the conclusion of CMP funding. If the applicant will be seeking other funding sources, please provide further detail.

	<ul style="list-style-type: none"> • All project materials – such as curriculum, websites, toolkits – should be developed prior to submission of an application.
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Attestation

22. Attestation Statement	<ul style="list-style-type: none"> • Provide the name of the signer. • Provide the signature of the applicant. • Provide the date of signature
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Application Attachments

- Applicants must include a list of all attachments included with the Kentucky CMP Fund Application. This ensures attachments submitted in separate files are not missed by the reviewers.
- Attachments include the following, as appropriate:
 - List of participating CNFs (name, CCN#, # of beds, census)
 - Letters of Support from all participating CNFs
 - Copy of most recent federal approved IDC rate agreement
 - Brochures/pictures of specialized equipment
 - Sample training agenda(s)
 - Extension project documentation (CMS approval letter, SA recommendation letter/email, Progress/Final report)

QUESTIONS TO CONSIDER BEFORE SUBMITTING THE CMP APPLICATION

NOTE: Applicants should be able to confidently answer “yes” to each question below:

- | Yes | No | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did I complete all sections of the application form? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did I present a compelling need for the project? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there sufficient preliminary data to support the project? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did I clearly state the benefit(s) to residents? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did I provide a timeline for implementation of the project that is feasible given the project’s goals and objectives? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are the project goals and objectives specific and measurable? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have I explained the significance of the overall project goal(s)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have I made provisions for data management and coordination? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did I sufficiently demonstrate CNF buy-in? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did I include bio-sketches of project personnel? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are project expenses reasonable and justifiable? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does the budget narrative match the budget spreadsheet? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have I proofread the application for grammar, misspellings, and typing errors? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have I labeled and included all application attachments? |

ADDITIONAL INFORMATION: POST SUBMISSION PROCESS & PROCEDURES

KY CMP FUND APPLICATION REVIEW (OIG)

The Kentucky Office of Inspector General (OIG) will review the submitted application for completeness and consistency with federal requirements. The OIG Grants Administrator will conduct an initial review which will not exceed thirty (30) working days. Upon completion of the initial review process, the proposal will be reviewed by the OIG Internal CMP Committee. The CMP committee meets once a month and will complete the review process in an additional sixty (60) calendar days. Upon completion of the review process, The CMP Committee will determine whether to submit the proposal to CMS for approval, deny the application, or request additional information.

1. The initial review includes completed application requirements and considers if the project meets federal CMS requirements included in 42 C.F.R. § 488.433 Civil money penalties: Uses and approval of civil money penalties imposed by CMS.
2. The initial review will follow a consistent process and use standard templates for every application review. During the review, the OIG Grants Administrator will work with the applicant's point of contact (POC) directly to address any missing information or deficiencies in the application.
3. If a submitted application contains any deficiencies or requires additional information to complete the review, the OIG Grants Administrator begins the corrective action process. When an application is returned to the applicant's POC, with identified application deficiencies or request for additional information, the applicant's POC will have fifteen (15) calendar days (unless otherwise indicated) to complete revisions and re-submit to the OIG Grants Administrator.
4. Projects that are determined to meet criteria for CMP fund use will be presented to the OIG Internal CMP Committee for discussion and recommendations. The CMP Committee is responsible for reviewing and providing any feedback regarding the submitted application and corresponding proposal.
5. Some applications may require additional information before a final determination regarding approval can be made. When an application is returned to the applicant with recommendation(s) for a revision, the applicant will have fifteen (15) calendar days (unless otherwise indicated) to complete revisions and re-submit to the CMP Committee.
6. After any additional information requested has been received and the OIG internal CMP Committee review process has been completed, the CMP Committee will determine whether to deny the application or recommend approval and forward the application to the CMPRP Team for consideration. The CMS review process would generally not exceed forty-five (45) calendar days. However, some applications may require additional information before CMS decides regarding approval.

KY CMP FUND APPLICATION REVIEW (CMS)

1. Upon receipt of an application by CMS, a tracking number will be assigned. Requests are reviewed by CMS in the order of receipt.
2. CMS may approve the CMP request, deny the CMP request, or request additional information.
3. If a submitted application contains any deficiencies or requires additional information to complete the review, the CMPRP team begins a corrective action process.
4. If CMS requests additional information on the application the OIG Grants Administrator shall notify the applicant Point of Contact (POC) of any action taken on the application via e-mail with written correspondence. When an application is returned to the applicant POC with recommendation(s) for a revision, the applicant will have ten (10) calendar days (unless otherwise indicated) to complete revision(s) and re-submit to the OIG Grants Administrator.

If the CMPRP team does not hear back from the OIG POC within the ten (10) calendar day period, or if they receive a revised application containing deficiencies, or if it is missing information, the CMPRP team will send a second corrective action request to the OIG POC. At this time the state will have five (5) calendar days (unless otherwise indicated) to respond.

5. Once information is received with corrections it will be returned to CMPRP team from OIG for a final determination. CMS will notify both the applicant and OIG of application approval, partial approval, or denial.
6. Neither OIG nor CMS are obligated to approve any fund requests or extensions. If the request is denied there is no right to appeal the decision.
7. Any cost is the responsibility of the applicant.
8. When OIG receives notice from CMS that the CMP Fund application has been approved, OIG will notify the applicant with instructions for entering into a contract with OIG to allow for the release of CMP funds.
9. For approved requests, the successful applicant is required to submit quarterly reports to OIG and CMS regarding the status of the project and progress toward the project objectives.
10. At the conclusion of the project, a Final Report describing the results of the project is to be submitted to OIG and CMS within sixty (60) calendar days of the project conclusion.

KY OIG CMP FUND CONTRACT PROCEDURES

1. When OIG receives notice from CMS that a CMP Fund application has been approved, OIG will notify the applicant with instructions for entering into a contract with OIG to allow for the release of CMP funds.
2. OIG will coordinate and promulgate the state contract process for all CMP projects.
3. OIG will serve as policy lead concerning the development, implementation, monitoring, and other aspects to ensure appropriate standards of practice.

4. OIG will complete the CMP fund contract process to ensure compliance with state and federal laws.
5. Final contract signatures will be obtained from the OIG Inspector General and the applicant after final reviews have taken place by CHFS Office of Administration and Technology Services (OATS), Division of Procurement and Grant Oversight and the OIG.
6. Prior to the start of the project, OIG will inform the contractor of required reporting and invoicing procedures as well as issue a Notice to Proceed indicating the start date of the project.
7. OIG will administer contractual payments for the CMP fund after reviewing invoices.
8. OIG will track and evaluate ongoing projects and project outcomes through project quarterly reports to ensure grantees are compliant and adhering to the project goals and objectives.
9. OIG will track ongoing project outcomes through quarterly reports as well as analyze and evaluate program outcomes and attend project events. The evaluation can include on-site visits at selected CNF project partners, surveying training or conference attendees, attending trainings or conferences, as well as a desk review of required reporting.
10. The website (<https://chfs.ky.gov/agencies/os/oig/Pages/cmpfunds.aspx>) is maintained by OIG. The website includes information on the approved and awarded CMP projects with the dollar amount, a brief description of the project, the grantee/contract recipients and other key information that Kentucky has submitted to CMS for the annual transparency report. The website is also used to develop requests for interests and requests for proposals.

REFERENCES (OIG, 2022)

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